Wisconsin Department of Health Services

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	0018595	A. BUILDING: _____ B. WING _____	R 06/12/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HOUSING MATTERS	**21450 LEES CT BROOKFIELD, WI 53045**

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
M 000	INITIAL COMMENTS On 06/10/2026, Surveyor conducted 1 verification visit at Housing Matters. Three deficiencies were identified. Three of 3 deficiencies were repeat violations. See Statement OF Deficiency (SOD) 3Q0S11, dated 04/14/2022 and UP3H11 dated 11/10/2025. Nine of 12 deficiencies in SOD UP3H11, dated 11/10/2025 were substantially corrected. Under statutory provisions of Wis. Stat. ch. 50, a $200 revisit fee is being assessed.	M 000		
M 246	88.04(5)(b) TRAINING-8 HOURS ANNUALLY Except as provided in pars. (c) and (d), the licensee and each service provider shall complete 8 hours of training approved by the licensing agency related to the health, safety, welfare, rights and treatment of residents every year beginning with the calendar year after the year in which the initial training is received. This Rule is not met as evidenced by: Based on interview and record review, the provider did not ensure that staff received at least 8 hours of continuing education training related to health, safety, welfare, resident rights and treatment of residents during 2025. Caregiver G completed no continuing education training in 2025.	M 246		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

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M 246	Continued From page 1 This is a repeat deficiency. See Statement of Deficiency (SOD) UP3H11 dated 11/10/2025. Findings include: The provider was licensed, 07/12/2021, to provide cares for up to 4 residents in the client groups traumatic brain injury, physically disabled, advanced aged, irreversible dementia/Alzheimer's, developmentally disabled and emotionally disturbed/mental illness. On 06/10/2026, Surveyor reviewed Caregiver G's records. S/he was hired 06/16/2023. The record did not contain 2025 annual training. On 06/11/2026 at 4:00 PM, Surveyor discussed concern regarding annual training with Administrator A who stated Caregiver G did not complete 2025 annual training.	M 246		
M 404	88.06(3)(a) INDIVIDUAL SERVICE PLAN & ASSESSMENT The licensee shall ensure that a written assessment and individual service plan is completed and developed for each resident within 30 days after placement. This Rule is not met as evidenced by: Based on record review and interview, the provider did not ensure the individual service plan (ISP) was developed in coordination with the pre-admission assessment.	M 404		

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M 404	Continued From page 2 Resident 5's assessed behaviors were not identified on his/her ISP. This is repeat deficiency. See Statement OF Deficiency (SOD) UP3H11 dated 11/10/2025. Findings include: On 06/10/2026, Surveyor reviewed Resident 5's record. S/he was admitted 04/04/2026. Assessment dated 05/01/2026: In the area of General Behavior- " ...Can yell and bang hands on walls and surfaces. Has gotten physically violent with family (grabbing). Typically able to separate [him/herself] to calm down." ISP (sent to guardian for digital signature 06/08/2026): The ISP did not address behaviors. On 06/10/2026 at 10:21 AM, Surveyor interviewed Licensee A who stated when Resident 5 was frustrated s/he yelled and slammed fist on table. Licensee A stated the frustatration was triggered by a family member/former guardian. Licensee A stated a 2nd family, who recently took over guardianship, was more reasonable resulting in decreased frustration and behaviors. On 06/12/2026 at 9:00 AM, Surveyor discussed concern of ISP not coordinated with the assessment with Licensee A who stated s/he did not add Resident 5's behaviors to the ISP because the behaviors were triggered by a family member.	M 404		

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M 466	Continued From page 3	M 466		
M 466	88.07(3)(e)1 MEDICATION- RECORD KEEPING The licensee shall keep a record of all prescription medications controlled, dispensed or administered by the licensee which show the name of the resident, the name of the particular medication, the date and time the resident took the medication and errors and omissions. The medication controlled by the licensee shall be kept in a locked place. This Rule is not met as evidenced by: Based on observation, record review and interview, the provider did not keep a record of all prescription medications controlled, dispensed or administered by the licensee showing the date and time the resident took the medication and errors and omissions for 2 of 2 residents reviewed. From 05/01/2026-06/03/2026, staff did not consistently document whether or not all Resident 3's scheduled physician ordered oral medications were administered. From 06/01/2026-06/09/2026, staff did not consistently document whether or not all Resident 5's scheduled physician ordered medications were administered. This is a repeat deficiency. See Statement Of Deficiency (SOD) 3Q0S11, dated 04/14/2022 and UP3H11 dated 11/10/2025. Findings include:	M 466		

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M 466	Continued From page 4 On 06/10/2026, Surveyor reviewed Resident 3's and Resident 4's records. Example 1- Resident 3 Resident 3 was admitted 03/19/2022. Schedule physician ordered medications administered by staff included: senna docusate 8.6-50 MG 1 tablet at bedtime (start date 09/15/2024); simvastatin 20 MG 1 tablet at bedtime (start date 05/11/2026); olanzapine 2.5 MG 1 tablet at bedtime (start date 05/11/2026); levothyroxine sodium 75 MCG 1 tablet at 7:00 AM before breakfast (start date 02/14/2025); amlodipine besylate 10 MG 1 tablet in AM; cyclobenzaprine 5 MG 1 tablet at bedtime (start date 10/16/2024); phenobarbital 32.4 MG 1 tablet in morning and 2 tablets at bedtime (start date 02/18/2026); lamotrigine 100 MG 1 tablet twice daily in morning and evening (start date 02/24/2026); and Vitamin D2 1250 MCG 1 capsule in morning once weekly on Fridays (start date 05/08/2026). Medication Administration Record (MAR) dated 05/01/2026-06/09/2026. From 05/01/2026-06/09/2026, staff did not document whether or not the following scheduled physician ordered medications were administered: 05/01/2026- All AM and PM medications (except 8:00 PM senna, simvastatin, olanzapine, formoterol, and cyclobenzaprine). 05/02/2026- All AM medications. 05/04/2026- All PM medications 05/05/2026- All 8:00 PM medications 05/06/2026- All PM medications 05/07/2026- All AM and PM medications 05/09/2026- All AM and PM medications 05/11/2026- All PM medications (except 8:00 PM	M 466		

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M 466	Continued From page 5	M 466		

cyclobenzaprine).
05/13/2026- All AM and PM medications (except 7:00 AM levothyroxine and 8:00 AM and amlodipine).
05/15/2026- All AM and PM medications
05/17/2026- All AM and PM medications
05/20/2026- 8:00 PM senna, simvastatin, and olanzapine.
05/21/2026- 8:00 PM senna, simvastatin, and olanzapine.
05/22/2026- All AM and PM medications
05/23/2026- All PM medications
05/25/2026- All AM and PM medications

05/27/2026- 7:00 AM levothyroxine and all 8:00 PM medications
06/01/2026- All PM medications
06/04/2026- 4:00 PM lamotrigine and all 8:00 PM medications
06/05/2026- All PM medications
06/08/2026- All 8:00 PM medications

Individual Service Plan (ISP) dated 03/04/2026: In the area of Medication Management " ... [Resident 3] self administers [sic] nostril sprays, inhalers and nebulizer medications ...Pills/capsules kept in kitchen medicine closet and staff administers ..."

Example 2- Resident 5
Resident 5 was admitted 04/04/2026.

Scheduled physician ordered medications included: senna 8.6 MG 1` tablet at bedtime (start date 06/03/2026); icosapent ethyl 1 gram 2 capsule twice daily (start date 06/03/2026); fluticasone propionate 50 MCG 1 spray in each nostril in the morning and carbamazepine ER 200 MG1 tablet twice daily (start date 06/05/2026).

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M 466	Continued From page 6 June 2026 MAR: From 06/004/2026 to 06/09/2026, staff did not document whether or not the following scheduled physician ordered medications were administered: 06/04/2026- All 8:00 PM medications 06/05/2026- 8:00 AM icosapent ethyl 06/06/2026- All 8:00 AM medications 06/07/2026- All 8:00 PM medications 06/08/2026- All 8:00 PM medications 06/09/2026- All 8:00 AM and 8:00 PM medications ISP dated 06/11/2026 In the area of Medication Management: "Resident's Needs/Preferences: Needs assistance administering medications. Resident's Desired Goals & Outcomes: To receive assistance from staff administering medications ..." On 06/12/2026 at 9:00 AM, Surveyor discussed concern of medication administration documentation with Licensee A who stated there were a lot of issues with the electronic medical record's MARs and pharmacy would not provide backup paper MARs.	M 466		